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APPLICATION NO.	FILING DATE		FIRST NAMED INVENTOR			ATTORNEY DOCKET NO.		CONFIRMATION NO.
10/722,000 TITLE OF INVENTION	11/25/2003 : ATTENUATED CHIM	RESPIRATORY S	Peter L. Collins SYNCYTIAL VIRUS			NIHB-2264	6530	
APPLN. TYPE	SMALL ENTITY	ISSUE FEE DUE		PUBLICATION FEE DUE	PREV. PAID ISSU	E FEE	TOTAL FEE(S) DUE	DATE DUE
nonprovisional	NO		\$1510	\$300	\$0		\$1810	11/04/2010
EXAMINER			ART UNIT	CLASS-SUBCLASS	1			
LUCAS, ZACHARIAH		•	1648 424-211100					
□ "Fee Address" ind PTO/SB/47; Rev 03-0 Number is required. 3. ASSIGNEE NAME A PLEASE NOTE: Uniterestation as set fort (A) NAME OF ASSIGNEE The Government as represented Health and Hume	ondence address (or Cha 3/122) attached. ication (or "Fee Address) 20 or more recent) attact ND RESIDENCE DAT: less an assignce is ideal hin 37 CFR 3.11. Com 3/NEE of the United by the Secreta an Services	" Indicated Use A TOB ified be oletion Stat	Correspondence ation form e of a Customer E PRINTED ON Clow, no assignce of this form is NO es of Ameri Department ries (will not be pr	(B) RESIDENCE: (CITY ca Rockvil of inted on the patent):	3 registered paters, and the firm (having as a gent) and the namers or agents. If printed. e) e) e) tent of a gents. If an assignment. and STATE OR (le, Marylan lindividual Country) Country Count	members of uno name	er a 2	k Washburn LLP
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